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## APPLICANTS

Clifford E. Gammons, Loudon, TN;

\*\* CONTINUING DATA \*\*\*\*\* *pp*\*\* FOREIGN APPLICATIONS \*\*\*\*\* *pp*IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
\*\* 05/07/2004

\*\* SMALL ENTITY \*\*

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>[Signature]</i> Examiner's Signature <i>[Initials]</i>	STATE OR COUNTRY TN	SHEETS DRAWING 4	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3
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## ADDRESS

22465  
PITTS AND BRITTIAN P C  
P O BOX 51295  
KNOXVILLE , TN  
37950-1295

## TITLE

Hand held remote cover

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